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| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | | | |
|-----|---|--|---|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
| 1. | Your full name | | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Sylwester First name Middle name | First name Middle name | | | |
| | Bring your picture identification to your meeting with the trustee. | Kopec Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | | | |
| 2. | All other names you have used in the last 8 years | | | | | |
| | Include your married or maiden names. | | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5369 | | | | |

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Case number (if known)

Debtor 1 Sylwester Kopec

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 4713 W. 99th St Oak Lawn, IL 60453 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Sylwester Kopec Page 3 07 50 Case number (if known)

| ar | t 2: Tell the Court About | Your E | Bankruptcy Ca | ise | | | | | |
|---|---|-----------|-------------------------------|-------------------------------------|---|-------------------------------|--|--------------------------|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | n of each, see <i>No</i> of page 1 and che | | | 342(b) for Individuals I | Filing for Bankruptcy |
| | choosing to file under | Chapter 7 | | | | | | | |
| | | | Chapter 11 | | | | | | |
| | | □ с | Chapter 12 | | | | | | |
| | | | Chapter 13 | | | | | | |
| | | | | | | | | | |
| 3. | How you will pay the fee | • | about how yo | u may pay. Ty attorney is sub | pically, if you are | paying the | fee yourself, you m | nay pay with cash, cas | al court for more details shier's check, or money redit card or check with |
| | | | | | stallments. If you | | s option, sign and a | attach the Application | for Individuals to Pay |
| | | | Ū | | ` | , | option only if you a | are filing for Chapter 7 | . By law, a judge may, |
| | | _ | but is not requapplies to you | uired to, waive ur family size a | your fee, and mand you are unab | ay do so onl le to pay the | y if your income is e fee in installments | less than 150% of the | official poverty line that option, you must fill out |
|). | Have you filed for bankruptcy within the | ■ N | 0. | | | | | | |
| | last 8 years? | ☐ Ye | | | | | | | |
| | | | District | | | When | | | |
| | | | District | | | When | | Case number | |
| | | | District | | | wnen | | Case number | |
| 10. | Are any bankruptcy | ■ N | 0 | | | | | | |
| | cases pending or being filed by a spouse who is | □ Ye | | | | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | | | | |
| | | | Debtor | | | | | Relationship to you | |
| | | | District | | | When | | Case number, if know | vn |
| | | | Debtor | | | | | Relationship to you | |
| | | | District | | | When | | Case number, if know | vn |
| 11. | Do you rent your residence? | ■ N | o. Go to li | ine 12. | | | | | |
| | | □ Ye | es. Has yo | ur landlord obt | tained an evictior | n judgment a | against you and do | you want to stay in yo | our residence? |
| | | | | No. Go to line | 12. | | | | |
| Yes. Fill out <i>Initial</i> S bankruptcy petition. | | | | | | About an Evi | iction Judgment Ag | ainst You (Form 101A | a) and file it with this |
| | | | | | | | | | |

Document Page 4 of 50 Case number (if known) Debtor 1 Sylwester Kopec Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Sylwester Kopec Page 5 of 50 Case number (if known)

Part 5:

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Sylwester Kopec Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** 19. How much do vou **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sylwester Kopec Signature of Debtor 2 Sylwester Kopec Signature of Debtor 1 Executed on May 2, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Sylwester Kopec Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Michael | J. Worwag | Date | May 2, 2016 | |
|-------------------------|------------------------|---------------|--------------------|--|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| Michael J. Printed name | Worwag | | | |
| Worwag & | Malysz, P.C. | | | |
| Firm name | • | | | |
| The People | es Advocates | | | |
| 2500 E. De | von Ave #300 | | | |
| Des Plaine | s, IL 60018 | | | |
| Number, Street, | City, State & ZIP Code | | | |
| Contact phone | 847.954.2350 | Email address | mjworwag@gmail.com | |
| #6256887 | | | | |
| Bar number & St | ate | | | |

| | | Docum | SIL TAUC O OI JO | |
|---|-------------------------|-------------------|------------------|--------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Sylwester Kopec | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is a |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | assets of what you own |
|----|--|-------------|---------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 85,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 3,200.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 88,200.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 219,443.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 71,089.10 |
| | Your total liabilities | \$ | 290,532.10 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 400.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 480.00 |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 9 of 50 Case number (if known) Debtor 1 Sylwester Kopec

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11: OR, Form 122B Line 11: OR, Form 122C-1 Line 14. | \$ | 0 | .00 |
|----|--|-----|---|-----|
| | 122A 1 Line 11, GR , 1 Gill 122B Line 11, GR , 1 Gill 122G 1 Line 14. | ' - | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on <i>Schedule E/F</i> , copy the following: | Tota | l claim |
|--|------|---------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 16-15058 Doc 1 Filed 05/02/16 Entered 05/02/16 17:57:04 Desc Main Document Page 10 of 50 Fill in this information to identify your case and this filing: Sylwester Kopec Middle Name Last Name First Name Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| _ | No. Go to Part 2. Yes. Where is the prop | perty? | | | | | | |
|-----|--|-------------|------------------------|--|---|--|---------------------------------------|--|
| | | .c.ty. | | | | | | |
| 1.1 | 4713 W. 99th St. Street address, if available, or other description | | | What | is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | | |
| | Oak Lawn | IL State | 60453-0000 ZIP Code | | Manufactured or mobile home Land Investment property | Current value of the entire property? \$170,000.00 | Current value of the portion you own? | |
| | | | □ □ Who | Timeshare Other has an interest in the property? Check one Debtor 1 only | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Joint tenant with ex-spouse | | | |
| | Cook | | | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ite erty identification number: | Check if this is con (see instructions) m, such as local | mmunity property | |
| | | | | | your entries from Part 1, including any | | | |

Official Form 106A/B Schedule A/B: Property page 1

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that

someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

Part 2: Describe Your Vehicles

■ No □ Yes

Debtor 1

Debtor 2

\$85,000.00

| | | Case 16-1505 | 58 Doc 1 | Filed 05/02/16 | | Desc Main |
|-----|--------------------------|---|--------------------|---------------------------|---|--|
| De | ebtor 1 | Sylwester Kopec | | Document | Page 11 of 50 Case number (if known | 1) |
| | | | | | cles, other vehicles, and accessories ownobiles, motorcycle accessories | |
| | _ ′ | o. 2 00.0, 1.0.00, 1.10.00 | o, porocinal mater | oran, norming voccolo, on | | |
| _ | ■ No □ Yes | | | | | |
| | | | | | | |
| | | | | | om Part 2, including any entries for => | \$0.00 |
| Pa | rt 3: De | scribe Your Personal and | d Household Item | s | | |
| | • | , , | · | est in any of the follow | ing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | old goods and furnish es: Major appliances, fu | | nina, kitchenware | | |
| | Yes. | Describe | | | | |
| | | Hou | sehold Goods, | Used Furniture and P | Personal Electronics | \$2,000.00 |
| 7. | Electror Exampl | | | | oment; computers, printers, scanners; music | collections; electronic devices |
| | | Describe | | | | |
| 8. | Exampl | bles of value es: Antiques and figurin other collections, m | | | oks, pictures, or other art objects; stamp, co | n, or baseball card collections; |
| | ■ No □ Yes. | Describe | | | | |
| | Example No | musical instruments | c, exercise, and | other hobby equipment; | bicycles, pool tables, golf clubs, skis; canoe | s and kayaks; carpentry tools; |
| | | Describe | | | | |
| | Firearn Examp ■ No | | guns, ammunitio | n, and related equipment | t | |
| | ☐ Yes. | Describe | | | | |
| | □ No | oles: Everyday clothes, | furs, leather coat | s, designer wear, shoes, | accessories | |
| | ■ Yes. | Describe | | | | |
| | | Use | d Personal Clo | thing | | \$700.00 |
| | _ ` | | costume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches, gems | , gold, silver |
| | ■ No □ Yes. | Describe | | | | |
| 13. | | rm animals oles: Dogs, cats, birds, h | norses | | | |
| | ☐ Yes. | Describe | | | | |

| Debtor 1 | Sylwester Ko | pec | Doo | ument | Page 12 of | f 50 Case number (if k | nown) | |
|-----------------------|---|-------------------------------|--|------------------|---------------------|---------------------------|--------------|---|
| 14. Any o | ther personal and | d house | hold items you did not | already list, | including any he | alth aids you did not | list | |
| ■ No | | | | | | | | |
| ☐ Yes | Give specific info | ormation | | | | | | |
| | | | your entries from Part 3 | | | ges you have attach | ed | \$2,700.00 |
| Part 4: Do | escribe Your Finance | cial Asset | ts | | | | | |
| Do you o | wn or have any le | egal or e | equitable interest in any | of the follo | ving? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | | | our wallet, in your home, | | | and when you file you | r petition | |
| | | | or other financial accounts ove multiple accounts with | | | in credit unions, broke | erage house | es, and other similar |
| ■ Yes | | | | Institution | name: | | | |
| | | 17.1. | Checking | PNC Bar | ık | | | \$200.00 |
| | | | | | | | | |
| | | 17.2. | Business Checking | US Bank | | | | \$100.00 |
| | | 17.3. | Money market | Scott Tra | de | | | \$200.00 |
| | | | cly traded stocks ent accounts with brokers | age firms, mo | ney market accou | nts | | |
| | | | Institution or issuer nam | e: | | | | |
| | ublicly traded stoventure | ock and | interests in incorporate | ed and uning | corporated busin | esses, including an i | nterest in a | n LLC, partnership, and |
| ■ Yes | Give specific info | | about them me of entity: | | | % of ownership: | | |
| | | 10 | 0% Shareholder of We | ebjet Enterp | rise, Ltd. | 100% | % | \$0.00 |
| Nego Non-i ■ No | tiable instruments | include p <i>ent</i> s are | nds and other negotiab personal checks, cashier those you cannot transfe about them | s' checks, pro | omissory notes, an | nd money orders. | | |
| | | Iss | uer name: | | | | | |
| | ment or pension ples: Interests in I | | ts SA, Keogh, 401(k), 403(b | o), thrift savin | gs accounts, or otl | her pension or profit-sl | naring plans | |
| ☐ Yes | List each accoun | | tely. of account: | Institution | name: | | | |

Official Form 106A/B Schedule A/B: Property page 3

| | | Case 16-15058 | Doc 1 | | Entered 05/02/16 17:57: Page 13 of 50 | 2:04 Desc Main |
|-----|------------------|--|------------------------------|-----------------------------|--|---|
| De | ebtor 1 | Sylwester Kopec | | Document | Case number (if ki | known) |
| 22. | Your sh | | you have mad | | inue service or use from a company tric, gas, water), telecommunications co | companies, or others |
| | ☐ Yes | | | Institution na | ame or individual: | |
| 23. | _ | es (A contract for a periodic | c payment of r | money to you, either for | life or for a number of years) | |
| | ■ No □ Yes | Issuer name | and description | on. | | |
| 24. | | s in an education IRA, in a c. §§ 530(b)(1), 529A(b), ar | | n a qualified ABLE pro | gram, or under a qualified state tuitio | ion program. |
| | ☐ Yes | Institution na | me and descr | ription. Separately file th | e records of any interests.11 U.S.C. § 5 | 521(c): |
| 25. | Trusts, ■ No | equitable or future intere | sts in proper | ty (other than anything | g listed in line 1), and rights or power | ers exercisable for your benefit |
| | | Give specific information al | bout them | | | |
| | Exampl ■ No | , copyrights, trademarks, les: Internet domain names | , websites, pr | | | |
| | | s, franchises, and other | | ngibles | | |
| 21. | | | | | holdings, liquor licenses, professional | al licenses |
| | ☐ Yes. (| Give specific information al | bout them | | | |
| Me | oney or p | roperty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | _ | ınds owed to you | | | | |
| | ■ No □ Yes. 0 | Give specific information ab | out them, incl | luding whether you alrea | ady filed the returns and the tax years | |
| | ■ No | • • | | ısal support, child suppo | ort, maintenance, divorce settlement, pro | property settlement |
| | | mounts someone owes y es: Unpaid wages, disabilit benefits; unpaid loans | y insurance p | | efits, sick pay, vacation pay, workers' co | compensation, Social Security |
| | | Give specific information | | | | |
| | | s in insurance policies es: Health, disability, or life | e insurance; he | ealth savings account (H | HSA); credit, homeowner's, or renter's in | insurance |
| | ■ Yes. N | lame the insurance compa Comp | iny of each po pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |

Official Form 106A/B Schedule A/B: Property page 4

Term Life Insurance Policy - No Cash

Surrender Value

\$0.00

Case 16-15058 Doc 1 Filed 05/02/16 Entered 05/02/16 17:57:04 Desc Main Document Page 14 of 50 Case number (if known) Debtor 1 Sylwester Kopec 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$500.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$85,000.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$2,700.00 58. Part 4: Total financial assets, line 36 \$500.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$88,200.00

Copy personal property total

62. Total personal property. Add lines 56 through 61...

\$3,200.00

\$3,200.00

| Fill in this infor | mation to identify your | case: | | | |
|---------------------|--------------------------|-------------------|-------------|-------------------------------------|---|
| Debtor 1 | Sylwester Kopec | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check if this is a amended filing | n |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Specific laws that allow exemption |
|--|--------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption. |
| 4713 W. 99th St. Oak Lawn, IL 60453 Cook County | \$85,000.00 | \$15,000.00 735 ILCS 5/12-901 |
| Line from Schedule A/B: 1.1 | | ☐ 100% of fair market value, up to any applicable statutory limit |
| Household Goods, Used Furniture and Personal Electronics | \$2,000.00 | \$2,000.00 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | ☐ 100% of fair market value, up to any applicable statutory limit |
| Used Personal Clothing Line from Schedule A/B: 11.1 | \$700.00 | ■ 100% 735 ILCS 5/12-1001(a) |
| Ellie Holli Gonedale Av.B. 11.1 | | ☐ 100% of fair market value, up to any applicable statutory limit |
| Checking: PNC Bank Line from Schedule A/B: 17.1 | \$200.00 | \$200.00 735 ILCS 5/12-1001(b) |
| Ellie Holli Gonedale A/B. 17.1 | | ☐ 100% of fair market value, up to any applicable statutory limit |
| Business Checking: US Bank Line from Schedule A/B: 17.2 | \$100.00 | \$100.00 735 ILCS 5/12-1001(b) |
| Line from Schedule A/D. 17.2 | | 100% of fair market value, up to any applicable statutory limit |

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Case number (if known)

| Sylwooter Ropes | | | · |
|---|--------------------------------------|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Money market: Scott Trade Line from <i>Schedule A/B</i> : 17.3 | \$200.00 | \$200.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Term Life Insurance Policy - No Cash Surrender Value Line from <i>Schedule A/B</i> : 31.1 | \$0.00 | \$1.00 100% of fair market value, up to any applicable statutory limit | 215 ILCS 5/238 |
| Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property cover □ No □ Yes | 3 years after that for ca | | , |

| | Case | 16-15058 | Doc 1 Filed 05/02/16 Document | Enterd Page 1 | ed 05/02/16 17:5 7 of 50 | 57:04 Desc N | 1ain |
|----------------|---|-----------------------|---|------------------|---|--|-----------------------------|
| Fill | in this informatio | n to identify you | | 1 440 1 | 7 01 00 | | |
| Deb | | ylwester Koped | Middle Name | Last Name | | | |
| | use if, filing) Fin | rst Name | Middle Name | Last Name | | | |
| Unit | ed States Bankrup | otcy Court for the | NORTHERN DISTRICT OF ILLIN | NOIS | | | |
| Cas (if kno | e number _{Dwn)} | | | | | _ | if this is an ded filing |
| | icial Form 10 hedule D : | | s Who Have Claims S | Secure | d by Property | <i>,</i> | 12/15 |
| s nee | eded, copy the Add per (if known). | itional Page, fill it | If two married people are filing together out, number the entries, and attach it to | | | | |
| | any creditors have | • | ,, , , | | | | |
| | | | his form to the court with your other s | chedules. ` | You have nothing else to | report on this form. | |
| | Yes. Fill in all o | of the information | below. | | | | |
| Part | List All Sec | cured Claims | | | | 0.1 | 0.1 |
| | | | more than one secured claim, list the credi | | | Column B | Column C |
| | | | s a particular claim, list the other creditors i cal order according to the creditor's name. | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Wells Fargo Ho Mortgage | ome | Describe the property that secures the | e claim: | \$219,443.00 | \$170,000.00 | \$49,443.00 |
| | Creditor's Name | | 4713 W. 99th St. Oak Lawn, IL Cook County | 60453 | | | |
| | 8480 Stagecoa Frederick, MD | | As of the date you file, the claim is: Clapply. Contingent | heck all that | | | |
| | Number, Street, City, S | | ☐ Unliquidated ☐ Disputed | | | | |
| _ | o owes the debt? (| Check one. | Nature of lien. Check all that apply. | | | | |
| | Debtor 1 only | | ☐ An agreement you made (such as mo car loan) | ortgage or se | ecured | | |
| | Debtor 2 only | | <u> </u> | | | | |
| | Debtor 1 and Debtor 2 at least one of the del | • | Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| | of least one of the del Check if this claim re community debt | | ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) | | | | |
| Date | debt was incurred | 12/10/07 | Last 4 digits of account number | er <u>009</u> 1 | | | |
| Ad | ld the dollar value o | of vour entries in C | column A on this page. Write that numbe | er here: | \$219.44 | 3.00 | |

If this is the last page of your form, add the dollar value totals from all pages. \$219,443.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Ou | .50 10 10000 1 | Document | Page 18 | 3 of 50 | Description |
|------------------------|---|---|--|-------------------------------|--|---|
| Fill | in this inform | nation to identify your | | 1 (200 ± | 7 01 00 | |
| Deb | otor 1 | Sylwester Kopec | | | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 | First Name | Middle Nove | Loot Nome | | |
| (Spo | use if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Bar | nkruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | |
| Cas | se number | | | | | |
| (if kn | own) | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| Off | icial Form | 106E/F | | | | |
| | | | ho Have Unsecured | Claims | | 12/15 |
| Sche Sche eft. / | edule G: Execut edule D: Credito Attach the Con | tory Contracts and Unexpors Who Have Claims Sec | that could result in a claim. Also ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | Do not include needed, copy t | any creditors with partially secure he Part you need, fill it out, numb | ed claims that are listed in per the entries in the boxes on the |
| | | l of Your PRIORITY Un | | | | |
| | _ ′ | rs have priority unsecure | d claims against you? | | | |
| | No. Go to Pa | art 2. | | | | |
| | Yes. | I - (V - ···· NONDDIODIT | N II. | | | |
| | | l of Your NONPRIORIT | | | | |
| | _ ' | | cured claims against you? | | | |
| | | ve nothing to report in this pa | art. Submit this form to the court with | your other sche | dules. | |
| | Yes. | | | | | |
| | unsecured clain | n, list the creditor separately | aims in the alphabetical order of the properties | d, identify what t | pe of claim it is. Do not list claims a | already included in Part 1. If more |
| | | | | | | Total claim |
| 4.1 | Aac | | Last 4 digits of acc | ount number | 5903 | \$32,347.00 |
| | | Creditor's Name | - Del | . : | One and 0/04/44 | |
| | | 2036 28405 Van Dyk MI 48093 | e Rd When was the deb | t incurrea? | Opened 9/01/11 | |
| | | reet City State Zlp Code | As of the date you | file, the claim i | s: Check all that apply | |
| | Who incur | rred the debt? Check one. | | | | |
| | Debtor | 1 only | ☐ Contingent | | | |
| | ☐ Debtor | 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor | 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least | t one of the debtors and and | _ | RITY unsecured | l claim: | |
| | | if this claim is for a comm | <u> </u> | | | |
| | debt Is the clair | m subject to offset? | ☐ Obligations arisi report as priority cla | | ration agreement or divorce that you | u did not |
| | ■ No | , | ' ' ' | | g plans, and other similar debts | |
| | ☐ Yes | | Other. Specify | | | |
| | 00 | | - Other. Specify | | | |

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Case number (if know)

| Deptoi | Sylwester Ropec | | Case number (ii know) | |
|--------|--|--|---|-------------|
| 4.2 | Aac | Last 4 digits of account number | 1750 | \$17,056.00 |
| | Nonpriority Creditor's Name Po Box 2036 28405 Van Dyke Rd 28405 Van Dyke Rd Warren, MI 48093 | When was the debt incurred? | Opened 11/01/11 | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debte | |
| | ■ No | | ig plans, and other similar debts | |
| | Yes | Other. Specify Collection | | |
| 4.3 | Aac Nonpriority Creditor's Name | Last 4 digits of account number | 9731 | \$3,308.00 |
| | Po Box 2036 28405 Van Dyke Rd | When was the debt incurred? | Opened 7/01/09 | |
| | Warren, MI 48093 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , 10 o. 110 dato you, 110 o.a | er chook an unit apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | | |
| 4.4 | Allied Interstate Nonpriority Creditor's Name | Last 4 digits of account number | | \$702.10 |
| | PO Box 361445 Columbus, OH 43216 | When was the debt incurred? | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alaba. | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | u Ciaiiii. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | nation agreement of divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other, Specify Collection for | or Jefferson Capital Systems | |
| | | | | |

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| Debt | or 1 Sylwester Kopec | Case number (if know) | |
|------|---|---|------------|
| 4.5 | Amex | Last 4 digits of account number 8613 | \$7,822.00 |
| | Nonpriority Creditor's Name Po Box 297871 | When was the debt incurred? Opened 8/26/12 | |
| | Fort Lauderdale, FL 33329 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | □ Unliquidated | |
| | Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | |
| 4.6 | Atg Credit | Last 4 digits of account number 4633 | \$60.00 |
| | Nonpriority Creditor's Name 1700 W Cortland St Ste 2 Chicago, IL 60622 | When was the debt incurred? Opened 9/29/15 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection Aus-Dc Associated Ur | |
| 4.7 | Capital One Auto Financial Nonpriority Creditor's Name | Last 4 digits of account number 1001 | \$1,736.00 |
| | 3901 Dallas Pkwy Plano, TX 75093 | When was the debt incurred? Opened 12/22/08 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | □ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Deficiency balance | |

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| Debtor | 1 Sylwester Kopec | | Case number (if know) | |
|--------|--|--|---|------------|
| 4.8 | Cavalry Portfolio Services Nonpriority Creditor's Name | Last 4 digits of account number | 0262 | \$3,362.00 |
| | Po Box 27288 Tempe, AZ 85285 | When was the debt incurred? | Opened 7/02/13 | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Collection | Chase | |
| | Chase Card | Last 4 digits of account number | 4065 | \$2,888.00 |
| | Nonpriority Creditor's Name Po Box 15298 Wilmington DE 10950 | When was the debt incurred? | Opened 6/17/13 | |
| | Wilmington, DE 19850 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | | |
| 4.1 | Jefferson Capital Systems | Last 4 digits of account number | 7003 | \$702.00 |
| | Nonpriority Creditor's Name 16 Mcleland Rd | When was the debt incurred? | Opened 12/09/09 | |
| - | Saint Cloud, MN 56303 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , | , | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | Aspire Card | |

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Case number (if know)

| Debtor 1 | Sylwester | Kopec | Document | r age 2/ | Case n | umber (if know) | |
|--------------------|---|--|---|---------------------|------------|---|-------------------------|
| 4.1 | | | | | .==. | | • |
| 1 | Midland Fun | • | Last 4 digits of ac | count number | 0754 | | \$1,106.00 |
| | Nonpriority Cred 2365 Norths San Diego, (| ide Dr Suite 30 | When was the del | ot incurred? | Open | ed 8/16/09 | |
| | | City State Zlp Code | As of the date you | ı file, the claim i | s: Check | all that apply | |
| , | Who incurred | the debt? Check one. | | | | | |
| | Debtor 1 on | ly | ☐ Contingent | | | | |
| | Debtor 2 on | ly | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | | |
| | | of the debtors and another | Type of NONPRIO | RITY unsecured | d claim: | | |
| | ☐ Check if thi | s claim is for a community | ☐ Student loans | | | | |
| | debt | bject to offset? | Obligations aris | | ration agi | reement or divorce that you did not | |
| | No | bject to onset? | | | g plans, a | and other similar debts | |
| | | | • | Factoring Co | ompany | Account Chase Bank Usa | |
| | ☐ Yes | | Other. Specify | N.A. | | | |
| 4.1 | The Objection | a Laur Eine | | | | | |
| - | The Shindle Nonpriority Cree | | Last 4 digits of ac | count number | | | \$0.00 |
| | | onwuin Rd. Suite 180 | When was the del | ot incurred? | | | |
| | | City State Zlp Code | As of the date you | ı file, the claim i | is: Check | all that apply | |
| | _ | the debt? Check one. | | | | | |
| | Debtor 1 on | ly | ☐ Contingent | | | | |
| | Debtor 2 on | у | □ Unliquidated | | | | |
| | Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | | |
| | At least one | of the debtors and another | Type of NONPRIO | RITY unsecured | d claim: | | |
| | | s claim is for a community | Student loans | | | | |
| | debt Is the claim su | bject to offset? | Obligations aris | | ration agi | reement or divorce that you did not | |
| | ■ No | | Debts to pension | on or profit-sharin | g plans, a | and other similar debts | |
| | ☐ Yes | | Other. Specify | Notice | | | |
| Dort 2 | List Other | s to Do Notified About a Dobt | That You Already | Listed | | | |
| Part 3: | • | s to Be Notified About a Debt | - | | | de liste dia Deuts 4 au 0. Ess sussus | |
| is tryin have m | g to collect fro nore than one o | m you for a debt you owe to som | eone else, list the ori ou listed in Parts 1 o | ginal creditor in | Parts 1 | dy listed in Parts 1 or 2. For examp or 2, then list the collection agency editors here. If you do not have add | here. Similarly, if you |
| Part 4: | Add the A | mounts for Each Type of Uns | ecured Claim | | | | |
| | | | | for statistical re | eporting | purposes only. 28 U.S.C. §159. Add | d the amounts for each |
| | unsecured cla | | | | | pp | |
| | | | | | | Total Claim | |
| т. | 6a. otal | Domestic support obligations | | | 6a. | \$0.00 | - |
| | ims | | | | | | |
| from Pa | | Taxes and certain other debts y | _ | | 6b. | \$ 0.00 | = |
| | 6c. 6d. | Claims for death or personal in Other. Add all other priority unsec | | | 6c. 6d. | \$ 0.00 \$ 0.00 | |
| | ou. | Chief. And all other phoney under | oured ciaims. Write tha | t amount note. | ou. | 5 0.00 | |
| | 6e. | Total Priority. Add lines 6a through | gh 6d. | | 6e. | \$ | - |
| | | | | | | Total Claim | |
| | 6f. | Student loans | | | 6f. | \$ 0.00 | |
| | otal | | | | | | |
| from Pa | ims art 2 6g. | Obligations arising out of a sep | | divorce that | 6a. | \$ 0.00 | |

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Sylwester Kopec

| ۵. | ••• | | 0.00 |
|-----|---|-----|-----------------|
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 71,089.10 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 71,089.10 |

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|-------------------|-------------|-----------------|
| Debtor 1 | Sylwester Kopec | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this |
| | | | | amended fil |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | h whom you have the c er, Street, City, State and ZIP Co | ontract or lease | State what the contract or lease is for |
|-----|-------------|--------------|---|------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | 0:4. | | 04-4- | 710.0-1- | _ |
| 0.0 | City | | State | ZIP Code | |
| 2.2 | | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 0.4 | City | | State | ZIP Code | |
| 2.4 | | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | City | | Ctata | ZID Codo | _ |
| | City | | State | ZIP Code | |

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| | | Docume | iii Paue 25 u | ม อบ | |
|--|---|--|---|--|---|
| Fill in this | information to identify your | | | | |
| Debtor 1 | Sylwester Kopec | | | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 (Spouse if, filir | ng) First Name | Middle Name | Last Name | | |
| | 3, | | | | |
| United Sta | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numl | per | | | | Charle if this is an |
| (ii kilowii) | | | | | Check if this is an amended filing |
| | | | | | S |
| | l Form 106H | | | | |
| Sched | ule H: Your Cod | ebtors | | | 12/15 |
| Arizon No. Yes 3. In Colin line Form | nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spoumn 1, list all of your codebt 2 again as a codebtor only i | Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran | e with you at the time? spouse as a codebtor tor or cosigner. Make s | ington, and Wisconsin.) if your spouse is filing sure you have listed the | y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZI | P Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, line | Α. |
| | Name | | | ☐ Schedule E/F, li | |
| | | | | ☐ Schedule G, line | e |
| | Number Street | _ | | _ | |
| | City | State | ZIP Code | | |
| | | | | Па | |
| 3.2 | Name | | | _ ☐ Schedule D, line ☐ Schedule E/F, li | |
| | | | | Schedule G, line | |
| _ | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | | | | | |
|----------|---|----------------------------|--------------------------------------|-----------|-------|---------------|------------|-------------------------|----------------------------------|----------|
| De | btor 1 Sylwester Ko | ppec | | | | | | | | |
| | btor 2 puse, if filing) | | | | | | | | | |
| Uni | ited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | | |
| | se number | | - | | | ☐ An ☐ A s | | d filing ent showing | g postpetition ollowing date: | |
| <u>O</u> | fficial Form 106I | | | | | MN | Л / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | 12/1 |
| atta | use. If you are separated and you ch a separate sheet to this form. Tt 1: Describe Employment Fill in your employment | | | | | | | | | |
| ١. | information. | | Debtor 1 | | | I | Debtor 2 | or non-fi | ling spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | | ☐ Emplo | • | | |
| | information about additional employers. | | ☐ Not employed | | | | □ Not e | mployed | | |
| | Include part-time, seasonal, or | Occupation | Self-Employed | | | | | | | |
| | self-employed work. | Employer's name | Webjet Enterprise | Ltd. | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 4713 W. 99th St. Oak Lawn, IL 604 | 53 | | | | | | |
| | | How long employed t | here? 5 years | | | | _ | | | |
| Pa | rt 2: Give Details About Mo | nthly Income | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | port for | any | line, write S | \$0 in the | space. Inc | clude your no | n-filing |
| | ou or your non-filing spouse have mee space, attach a separate sheet to | | ombine the information | for all e | emplo | oyers for th | nat perso | n on the li | nes below. If | you need |
| | | | | | | For Debt | or 1 | | otor 2 or ng spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4 | Calculate gross Income Add li | ne 2 + line 3 | | 4 | \$ | | 2.00 | \$ | Ν/Δ | |

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| For Debtor 1 | Deb | tor 1 | Sylwester Kopec | _ | (| Case | number (if known) | _ | | | | |
|---|-----|-------------------|--|------|----|----------|-------------------|----|----------|----------|--------|--------|
| S. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Valuatary contributions for retirement plans 5d. Valuation plants for the valuation of the valuati | | | | | | For | Debtor 1 | | | | | |
| 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for selections for the state of | | Сор | y line 4 here | 4. | | \$_ | 0.00 | | | illing 0 | - | |
| 5a. Tax, Medicare, and Social Security deductions 5a. \$ 0.00 \$ N/A 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ N/A 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5c. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5d. Insurance 5d. \$ 0.00 \$ N/A 5d. Interval 5d. \$ 0.00 \$ N/A 5d. Interval 5d. \$ 0.00 \$ N/A 5d. Interval 5d. \$ 0.00 \$ N/A 5d. Other deductions. Specify: 5d. \$ 0.00 \$ N/A 5d. Other deductions. Add lines 5450+55c+5545e+5f+5g+5h. 6d. \$ 0.00 \$ N/A 5d. Add the payroll deductions. Add lines 5450+5c+5545e+5f+5g+5h. 6d. \$ 0.00 \$ N/A 5d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7d. \$ 0.00 \$ N/A 5d. Interval 5d. \$ 0.00 \$ N/A 5d. Interval 5d. \$ 0.00 \$ N/A 5d. Not her income regularly received: 5d. \$ 0.00 \$ N/A 5d. Not her income regularly received: 5d. \$ 0.00 \$ N/A 5d. Not her income regularly received: 5d. \$ 0.00 \$ N/A 5d. Not her income to the property and from operating a business. Not income to the property and from operating a business. Not income to the property and from operating a business. Not income to the property and property and the total monthly not income. 8d. \$ 0.00 \$ N/A 5d. Other property settlement. 8d. \$ 0.00 \$ N/A 5d. Other government for each property settlement. 8d. \$ 0.00 \$ N/A 5d. Other government assistance that you regularly receive 10d. \$ 0.00 \$ N/A 5d. Other government assistance that you regularly receive 10d. \$ 0.00 \$ N/A 5d. Other government assistance that you subsidies. 8d. \$ 0.00 \$ N/A 5d. Other government income 8d. \$ 0.00 \$ N/A 5d. Other government income 8d. \$ 0.00 \$ N/A 5d. Other government income 8d. \$ 0.00 \$ N/A 5d. Other government income 8d. \$ 0.00 \$ N/A 5d. Other government income 8d. \$ 0.00 \$ N/A 5d. Other government assistance and the value (if known) of any non-cash assistance that you receive such as foot st | 5. | List | | | | | | | | | | |
| 55. Mandatory contributions for retirement plans 5c. \$ 0.00 \$ N/A | 0. | | • • | 5a | 1 | \$ | 0.00 | | \$ | | N/A | |
| 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. S. 0.000 \$ N/A 5e. Insurance 5f. S. 0.000 \$ N/A 5g. Union dues 5f. S. 0.000 \$ N/A 5g. Union dues 5g. S. 0.0 | | | taran da arang da ar | | | | | | · — | | | |
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| 56. Domestic support obligations 59. 10 ion dues 59. 2 | | | | | | · — | | | | | | |
| 5g, Union dues 5h. Other deductions. Specify: 5h. Sound \$5h. \$0.00 \$N/A 5h. \$0.0 | | 5f. | Domestic support obligations | | | · — | | | · — | | | |
| 5h. Other deductions. Specify: Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Bayer line and the payroll deductions. Add lines 5a+5b+5 | | | | | | | | | · — | | | |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8th. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 10. Out expect an increase or decrease within the year after you file this form? | | - | Other deductions. Specify: | - | | \$ | | + | \$ | | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm acch property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include allmony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsides. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 11. On ont include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include Contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. \$ 400.00 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | 6. | | · · · | | | \$ \$ | | | · — | | | |
| 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. \$ 0.00 \$ N/A 8e. Social security 8f. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. * \$ 0.00 Combined monthly income. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, it it applies | | | | | | · — | | | · — | | | |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 400.00 \$ N/A Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 400.00 Combined monthly income. | | List | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross | ,. | | Ψ_ | 0.00 | | Ψ | | 14// | |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for bettor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4d dt the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it No. | | | | 9.0 | | Ф | 400.00 | | c | | NI/A | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4dd the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. 400.00 Combined monthly income. No. | | 8h | • | | | | | | | | | |
| 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$400.00 \$N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | : | | · — | | | ·— | | | |
| 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4d the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 400.00 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | | 8d. | | | | · — | | | | | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | | | | | · — | | | · | | | |
| 8h. Other monthly income. Specify: 8h. + \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 400.00 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? | | | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | · — | 0.00 | | | | N/A | |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 400.00 Combined monthly income No. | | - | | | | · — | | + | · | | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 400.00 Combined monthly income No. | | 011. | | _ 0. | | | 0.00 | ٠, | | | 14// 1 | 1 |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income No. | 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | ; | \$ | 400.00 | | \$ | | N/A | |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income No. | 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 400 00 + \$ | | | N/Δ | = \$ | 400 00 |
| Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. | | | | | *- | | 100.00 | | | | - | 100.00 |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{400.00}{\text{Combined}}\$ 13. Do you expect an increase or decrease within the year after you file this form? No. | 11. | Incluothe Do r | ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not | depe | | | • | • | | | | 0.00 |
| monthly income 13. Do you expect an increase or decrease within the year after you file this form? ■ No. | 12. | Writ | e that amount on the Summary of Schedules and Statistical Summary of Certa | | | | | | | 12. | \$ | |
| | 13. | Doy | • | ? | | | | | | | | |
| | | | | | | | | | | | | |

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| Eill | in this informs | tion to identify | our cocci | | | 1 | | |
|------------|------------------------------|--|------------------------|---|--|------------------|------------------------------------|-------------------------------|
| | | ition to identify yo | | | | | | |
| Deb | tor 1 | Sylwester Ko | pec | | | | k if this is: An amended filing | |
| Deb | tor 2 | | | | | _ | ū | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | 1 | 13 expenses as of | the following date: |
| Unit | ed States Bankı | ruptcy Court for the | : NORTH | ERN DISTRICT OF ILLIN | OIS | <u> </u> | MM / DD / YYYY | |
| | e number | | | | | | | |
| (If kı | nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| S | chedule | J: Your | Exper | ises | | | | 12/15 |
| Be info | as complete ormation. If m | and accurate as | possible eded, atta | . If two married people ar ch another sheet to this | | | | |
| Par 1. | t 1: Descr Is this a joir | ribe Your House | hold | | | | | |
| ٠. | No. Go to | | | | | | | |
| | | | in a separ | ate household? | | | | |
| | □N | 0 | | | | | | |
| | ΠY | es. Debtor 2 mus | st file Offici | al Form 106J-2, Expenses | for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Child | | 3 | ■ Yes □ No |
| | | | | | Child | | 5 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| 3. | | enses include | _ | No | | | | — 103 |
| | | f people other t d your depende | | Yes | | | | |
| Dor | | | | ly Evnence | | | | |
| exp | imate your ex | | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | h assistance an | | government assistance i cluded it on <i>Schedule I:</i>) | | | Your exp | enses |
| (0 | | ,01., | | | | | | |
| 4. | | or home owners and any rent for the | | ses for your residence. I or lot. | nclude first mortgag | e 4. \$ | | 0.00 |
| | If not include | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | • | rty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | maintenance, re owner's associat | | upkeep expenses | | 4c. \$ 4d. \$ | | 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | 4u. 5 5. \$ | | 0.00 |

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| Debtor 1 | Sylwester Kopec | Case num | ber (if known) | |
|-----------------|---|--------------|----------------|------------------------|
| 6. Uti l | ities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 0.00 |
| 6b. | Water, sewer, garbage collection | 6b. | · | 0.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | |
| | | | · - | 80.00 |
| 6d. | | 6d. | · | 0.00 |
| | od and housekeeping supplies | 7. | · | 300.00 |
| . Chi | Idcare and children's education costs | 8. | \$ | 0.00 |
| Clo | thing, laundry, and dry cleaning | 9. | \$ | 50.00 |
|). Per | sonal care products and services | 10. | \$ | 0.00 |
| i. Me | dical and dental expenses | 11. | \$ | 0.00 |
| 2. Tra | nsportation. Include gas, maintenance, bus or train fare. | | | |
| | not include car payments. | 12. | \$ | 50.00 |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| | aritable contributions and religious donations | 14. | · | 0.00 |
| | urance. | | T | 0.00 |
| | not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| | . Health insurance | 15a. 15b. | · | |
| | | | · | 0.00 |
| | . Vehicle insurance | 15c. | | 0.00 |
| | . Other insurance. Specify: | 15d. | \$ | 0.00 |
| | res. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | ecify: | 16. | \$ | 0.00 |
| ′. Ins | tallment or lease payments: | | | |
| 17a | . Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b | . Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c | Other. Specify: | 17c. | \$ | 0.00 |
| | l. Other. Specify: | 17d. | | 0.00 |
| | ur payments of alimony, maintenance, and support that you did not report as | | · | 0.00 |
| | lucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$ | 0.00 |
| | her payments you make to support others who do not live with you. | | \$ | 0.00 |
| | ecify: | 19. | · | 0.00 |
| | per real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e | | our Incomo | |
| | ier real property expenses not included in lines 4 or 5 of this form of on <i>Sch</i> e i. Mortgages on other property | 20a. | | 0.00 |
| | | | · | 0.00 |
| | . Real estate taxes | 20b. | · · - | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| 20c | l. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| . Oth | er: Specify: | 21. | +\$ | 0.00 |
| | | | | 0.00 |
| | culate your monthly expenses | | | |
| 22a | . Add lines 4 through 21. | | \$ | 480.00 |
| 22b | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 480.00 |
| 220 | . Add into LEd and LED. The result to your monthly expenses. | | * | 700.00 |
| | culate your monthly net income. | | | |
| | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 400.00 |
| | Copy your monthly expenses from line 22c above. | 23b. | · | 480.00 |
| 201 | . Sopy your monthly expended from the 220 above. | 200. | | 400.00 |
| 230 | Subtract your monthly expenses from your monthly income. | | | |
| 230 | The result is your <i>monthly net income</i> . | 23c. | \$ | -80.00 |
| | THE TESUR IS YOUR THORITING HELTHOUTHE. | _00. | | |
| 4 Do | you expect an increase or decrease in your expenses within the year after yo | u file this | form? | |
| | example, do you expect to finish paying for your car loan within the year or do you expect you | | | or decrease because of |
| | lification to the terms of your mortgage? | | , | 2. 300.0000 booddoo or |
| | | | | |
| | | | | |
| □, | Yes. Explain here: | | | |

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| Fill in th | nis information to identify your | case: | | | |
|-------------------------|--|--------------------------|------------------------------|-----------------------------|------------------------------------|
| Debtor 1 | Cymrodian Mapaa | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, | - | Middle Name | Last Name | | |
| United S | States Bankruptcy Court for the: | NORTHERN DISTRICT | T OF ILLINOIS | | |
| | ratios Barriagnos, Goart for anor | | | | |
| Case nu | ımber | | | | Chapte if this is an |
| (II KIIOWII) | | | | | Check if this is an amended filing |
| | | | | | |
| . | | | | | |
| | al Form 106Dec | | | | |
| Decl | laration About a | an Individual | l Debtor's Sc | hedules | 12/15 |
| | Sign Below | | | | |
| Did | I you pay or agree to pay some | eone who is NOT an atto | rney to help you fill out ba | ankruptcy forms? | |
| _ | No | | | | |
| _ | Yes. Name of person | | | Attach Rankruntov Po | tition Preparer's Notice, |
| ш | | | | | ature (Official Form 119) |
| | | | | | |
| | ler penalty of perjury, I declare they are true and correct. | that I have read the sum | nmary and schedules filed | I with this declaration and | |
| | • | | v | | |
| Χ. | /s/ Sylwester Kopec Sylwester Kopec | | X Signature of I | Debtor 2 | |
| | Signature of Debtor 1 | | Oignaturo or E | | |
| | Data May 2 2016 | | Date | | |
| | Date May 2, 2016 | | Date | | |

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| | l in this inform | ation to identify you | r 00001 | | | |
|-------------------|--|---|--|---|--|---|
| | | ation to identify you | case. | | | |
| De | btor 1 | Sylwester Kopec First Name | Middle Name | Last Name | | |
| | btor 2 | E N | ACT III AL | | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Bar | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| | se number | | | | _ | theck if this is an mended filing |
| | fficial For atement | | Affairs for Indivic | duals Filing for B | ankruptcy | 4/10 |
| info nur | ormation. If months in the mon | ore space is needed,). Answer every que | attach a separate sheet to | this form. On the top of any | equally responsible for sup additional pages, write you | |
| 1. | | current marital statu | | Lived Belole | | |
| • | _ | our one marker state | | | | |
| | ■ Married■ Not marr | ried | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No □ Yes. Mal | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | fficial Form 106H). | | |
| Pa | rt 2 Explain | n the Sources of You | r Income | | | |
| 4. | Fill in the total | amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | • | of current year until I for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$1,500.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | Operating a business | | ☐ Operating a business | |

Official Form 107

Page 32 of 50 Case number (if known) Debtor 1 Sylwester Kopec

| | | | | Debtor 1 | | Debtor 2 | | |
|----|--------------------------------|---------------------------------|--|--|---|--|------------------------|---|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of incor Check all that app | | Gross income (before deductions and exclusions) |
| | r last cale anuary 1 to | ndar year: December | 31, 2015) | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, comm bonuses, tips | issions, | |
| | | | | Operating a business | | Operating a bu | ısiness | |
| | | ndar year be December | | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, comm bonuses, tips | issions, | |
| | | | | Operating a business | | Operating a bu | ısiness | |
| | and other winnings. List each | r public bene If you are fil | fit payments; ing a joint cas the gross inco | ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat | est; dividends; money collector received together, list it o | ted from lawsuits; ro only once under Deb | yalties; and tor 1. | |
| | | | | Debtor 1 | | Debtor 2 | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of incor Describe below. | ne | Gross income (before deductions and exclusions) |
| Pa | rt 3: Lis | st Certain Pa | ayments You | Made Before You Filed for I | Bankruptcy | | | |
| 6. | Are eithe □ No. | Neither D individual | ebtor 1 nor I primarily for a | a's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol | imer debts. Consumer debts d purpose." | | · · | 1(8) as "incurred by an |
| | | During the No. | 90 days before 90 go to line 7 | ore you filed for bankruptcy, di | d you pay any creditor a total | I of \$6,425* or more | ? | |
| | | ☐ Yes | List below of paid that cr | each creditor to whom you pai editor. Do not include paymen payments to an attorney for th | ts for domestic support oblig | | | |
| | | * Subject | | t on 4/01/19 and every 3 years | | or after the date of a | adjustment. | |
| | Yes | | | or both have primarily consurer you filed for bankruptcy, die | | I of \$600 or more? | | |
| | | ■ No. | Go to line 7 | 7. | | | | |
| | | □ Yes | include pay | each creditor to whom you pai vments for domestic support ol r this bankruptcy case. | | | | |
| | Creditor | r's Name an | d Address | Dates of payme | nt Total amount | Amount you | Was this p | payment for |

Page 33 of 50 Case number (if known) Document Debtor 1 Sylwester Kopec

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | | |
|-----|--|-----------------------|---------------------|-------------------------|-------------------------|------------------------------|--|--|--|--|--|
| | No | | | | | | | | | | |
| | Yes. List all payments to an insider. | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | | | | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | ments or transfer a | any property on | account of a d | ebt that benefited an | | | | | |
| | No | | | | | | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name | | | | | |
| Pa | rt 4: Identify Legal Actions, Repossessio | ns, and Foreclosures | | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | | | | | |
| 10. | Within 1 year before you filed for bankrupe Check all that apply and fill in the details below No. Go to line 11. ☐ Yes. Fill in the information below. | | erty repossessed, f | oreclosed, garn | ished, attache | d, seized, or levied? | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | 9 | Value of the property | | | | | |
| | | Explain what happene | d | | | F F | | | | | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount | | | | | | | | | | |
| | | | | take | en | | | | | | |
| | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes | | erty in the possess | ion of an assign | ee for the ben | efit of creditors, a | | | | | |
| Pa | t 5: List Certain Gifts and Contributions | | | | | | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. Ciffs with a total value of more than \$500 | | | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | | es you gave gifts | Value | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | | |

Case 16-15058 Doc 1 Filed 05/02/16 Entered 05/02/16 17:57:04 Desc Main Page 34 of 50 Document Case number (if known) Debtor 1 Sylwester Kopec 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Worwag & Malysz, P.C. Attorney Fees \$1,300 \$650.00 The Peoples Advocates 2500 E. Devon Ave #300 Des Plaines, IL 60018 mjworwag@gmail.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who

promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

Nο

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Description and value of Address property transferred paid in exchange Person's relationship to you

Describe any property or payments received or debts

Date transfer was made

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Debtor 1 Sylwester Kopec

| 19. | Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote | | y property to a | self-settle | ed trust or similar device | of which you are a | | |
|-----|--|--|------------------|-------------|--|---|--|--|
| | No Yes. Fill in the details. | | | | | | | |
| | Name of trust | Description and v | alue of the pro | perty trans | sferred | Date Transfer was made | | |
| Pa | rt 8: List of Certain Financial Accounts, Inst | ruments, Safe Deposit | t Boxes, and S | torage Unit | ts | | | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associates. | other financial accou | nts; certificate | s of deposi | | | | |
| | ■ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | | Last 4 digits of account number | Type of acco | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for | bankruptcy, a | ny safe de | posit box or other depos | sitory for securities, | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | | |
| 22. | Have you stored property in a storage unit or | place other than your | home within 1 | year befo | re you filed for bankrupt | cy? | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | | |
| Dα | rt 9: Identify Property You Hold or Control fo | , | | | | | | |
| Га | identify Property You Hold of Control to | or someone cise | | | | | | |
| 23. | Do you hold or control any property that som for someone. | eone else owns? Incli | ude any prope | ty you bor | rowed from, are storing | for, or hold in trust | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value | | |
| | rt 10: Give Details About Environmental Infor | | | | | | | |
| For | the purpose of Part 10, the following definition | ns apply: | | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s | air, land, soil, surface | e water, groun | | | | | |
| | Site means any location, facility, or property a | - | environmental | law, wheth | ner you now own, operat | e, or utilize it or used | | |

Official Form 107

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Sylwester Kopec

| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | | | | | |
|--|--|--|---------|-----------------------|-----------------------|--------------------|--|--|--|
| | Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | | Environmer know it | ntal law, if you | Date of notice | | | |
| 25. | Have you notified any governmental unit of a | any release of hazardous material? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | | Environmer know it | ntal law, if you | Date of notice | | | |
| 26. | Have you been a party in any judicial or adm | inistrative proceeding under any en | vironn | nental law? | Include settlements a | and orders. | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ure of the c | ase | Status of the case | | | |
| Par | 11: Give Details About Your Business or C | Connections to Any Business | | | | | | | |
| 27. | Within 4 years before you filed for bankrupto | cy, did you own a business or have a | ny of | the followin | g connections to any | business? | | | |
| | ☐ A sole proprietor or self-employed in | a trade, profession, or other activity | , eithe | er full-time (| or part-time | | | | |
| | ■ A member of a limited liability compa | any (LLC) or limited liability partners | hip (L | LP) | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing exe | cutive of a corporation | | | | | | | |
| | ☐ An owner of at least 5% of the voting | or equity securities of a corporation | า | | | | | | |
| | ☐ No. None of the above applies. Go to Pa | art 12. | | | | | | | |
| | Yes. Check all that apply above and fill it | in the details below for each busines | ss. | | | | | | |
| | Business Name Address | Describe the nature of the business | i | | Identification number | | | | |
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | | iness existed | namber of fritt. | | | |
| | | Web design | | EIN: | 45-2406428 | | | | |
| | 4713 W. 99th St. Oak Lawn, IL 60453 | A&B Accounting & Tax Service | | From-To | 5/26/11 - present | | | | |
| 28. | Within 2 years before you filed for bankrupto institutions, creditors, or other parties. | cy, did you give a financial statement | t to an | yone about | your business? Inclu | ıde all financial | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | | | | | | |
| | | | | | | | | | |

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Case number (if known)

Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sylwester Kopec Sylwester Kopec Signature of Debtor 2 Signature of Debtor 1 Date Date May 2, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inform | nation to identify your | case: | | | |
|--------------------------------------|--|---|---|--|---|
| Debtor 1 | Sylwester Kopec | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | nkruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | | |
| | | | | | |
| Case number(if known) | | | | | ☐ Check if this is an amended filing |
| Official Fo Statemer | | n for Indiv | viduals Filing | ı Under Chapter | 7 12/15 |
| | vidual filing under cha claims secured by yo | - | I out this form if: | | |
| you have lease | ed personal property a s form with the court w ver is earlier, unless th | and the lease has n vithin 30 days after | you file your bankrupto | ey petition or by the date set flust also send copies to the c | for the meeting of creditors, creditors and lessors you list |
| | ople are filing togethe | r in a joint case, bo | th are equally responsi | ble for supplying correct info | ormation. Both debtors must |
| | and accurate as possib our name and case nur | | s needed, attach a sepal | rate sheet to this form. On th | e top of any additional pages, |
| | our Creditors Who Hav | | : Creditors Who Have C | Claims Secured by Property (| Official Form 106D), fill in the |
| information be | - | | | o do with the property that | Did you claim the property as exempt on Schedule C? |
| | | | | | |
| Creditor's W | /ells Fargo Home Moi | rtgage | ☐ Surrender the prope | erty. | □ No |
| name: | | | Retain the property | and redeem it. | = |
| Description of | 4713 W. 99th St. O | aklawn II | Retain the property Reaffirmation Agre | | Yes |
| property securing debt: | 60453 Cook Count | , | Retain the property | | |
| | | | | | |
| For any unexpire in the information | n below. Do not list rea | ase that you listed al estate leases. Un | expired leases are lease | | Leases (Official Form 106G), fill lease period has not yet ended. |
| Describe your u | nexpired personal pro | nerty leases | | | Will the lease be assumed? |
| | noxpired personal pro | polity loaded | | | |
| Lessor's name: Description of lea | ised | | | [| □ No |
| Property: | | | | Γ | ☐ Yes |
| Lessor's name: | | | | Γ | □ No |
| Description of lea Property: | ased | | | ι | ☐ Yes |
| Lessor's name: | | | | Γ | □ No |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Del | otor 1 | Sylwester Kopec | Case number (if known) | |
|------|---------------------|---------------------------------------|---|------------------------------|
| | | | | |
| | scriptioi perty: | n of leased | | ☐ Yes |
| 1 10 | perty. | | | Li Yes |
| Les | sor's n | ame: | | □ No |
| | | n of leased | | _ |
| Pro | perty: | | | ☐ Yes |
| Les | sor's n | ame: | | □ No |
| | | n of leased | | |
| Pro | perty: | | | ☐ Yes |
| Les | sor's n | ame: | | □ No |
| | | n of leased | | L 110 |
| Pro | perty: | | | ☐ Yes |
| Les | sor's n | ame: | | □ No |
| | | n of leased | | L 110 |
| Pro | perty: | | | ☐ Yes |
| Par | t 3: | Sign Below | | |
| ıaı | | oigii Below | | |
| | | | cated my intention about any property of my estate that sec | ures a debt and any personal |
| pro | perty th | nat is subject to an unexpired lease. | | |
| Χ | /s/ S | ylwester Kopec | X | |
| | | ester Kopec | Signature of Debtor 2 | |
| | Signa | ature of Debtor 1 | | |
| | Date | May 2, 2016 | Date | |
| | 0 | maj 2, 2010 | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| C | hapter 7: | Liquidation | |
|----------|-----------|--------------------|--|
| | \$245 | filing fee | |
| | \$75 | administrative fee | |
| <u>+</u> | \$15 | trustee surcharge | |
| | \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-15058 Doc 1 Filed 05/02/16 Entered 05/02/16 17:57:04 Desc Main Document Page 44 of 50

WORWAG & MALYSZ, P.C.

adba The Peoples Advocates www.worwagmalyszlaw.com

2500 E. Devon Ave #300 Des Plaines, Illinois 60018 Phone: 847.533.3303 Email: mjworwag@gmail.com 10135 S. Roberts Rd. #205 Palos Hill, Illinois.60465 Phone: 773.586.4010 Fax:847:954:2765

Retainer for Legal Services

Chapter 7- Eliminates dischargeable unsecured debts. Certain debts may not be dischargeable.
+\$70.00 cc

Your fee for our services is \$ \(\frac{1300}{000} \). This is a "flat fee" of which half is for services rendered prior to your case being filed and the other half is for services rendered after your case is filed. Any portion of the retainer not earned will be refunded to you.

Today you paid \$ 650.

You agree to pay the balance of \$ 650 by the date of the trustee meeting.

Filing Fee- You will also provide a separate payment for \$335.00. The \$335 filing fee is a separate cost and is not included in the fee that you were quoted for our services and must be paid before we file.

This agreement will serve as an engagement agreement that will establish the terms of our relationship. When you sign it, it will become a contract between us. In passing the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005, the Congress imposed strict requirements upon attorneys representing debtors, requiring them to specify what duties they will perform and to make certain representations to clients. Those specific duties and representations are set out in the representation agreement. Please read this agreement carefully and be sure you understand it. If you have any questions, you should consult with me before signing. Once you are satisfied with the agreement, please sign and return a copy to me. The following are the specifics of our proposed representation. We will:

- Meet with you to discuss your financial situation and possible solutions;
- 2. Provide the section 342(b)(1) notice, which sets out the purpose, benefits, and costs of filing under Chapters 7, 11, 12 or 13; the types of services available from credit counseling agencies; and the penalties of committing certain bankruptcy crimes, and will explain the notice to you;
- 3. Prepare the necessary bankruptcy petition, schedules, statement of affairs, and other documents, and review and file the bankruptcy case under the chapter you select;
- Prepare for and accompany you to the section 341 first meeting of creditors;
- Assist in the amendments to the papers filed and the production of such documents as the trustee requests;
- 6. Assist you in the negotiation and execution of reaffirmation agreements that are in your best interest and meet all requirements of the law.

FULL DISCLOSURE- You agree that you will fully disclose all financial information. You agree to disclose ALL of your assets, debts and income and understand that it is a Federal crime to omit any other information from your bankruptcy petition punishable by fine of up to \$500,000 or imprisonment for up to 5 years or both. You also agree to provide our office with proof of your income for the last six months and your tax returns for the previous two (2) years.

→FINANACIAL MANANGEMENT AND CREDIT COUNSELING COURSES- Under the new law you are required to take a Credit Counseling Course prior to the filing of your bankruptcy petition and a Financial Management Course prior to the discharge of your bankruptcy for an

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ADDITITONAL FEE (usually no more than \$100). If you fail to complete these courses your bankruptcy will be denied.

Attached are notices and information I am required to give you by law. Please read all information.

Debt Relief Agency Disclosures to an Assisted Person

Section 527 of the Bankruptcy Code requires a Debt Relief Agency to provide an assisted person with the following:

- 1. A copy of the notice prepared by the clerk of the Bankruptcy Court, in accordance with the requirements of § 342(b), which is attached hereto and which contains:
 - (1) a brief description of
 - (A) Chapters 7, 11, 12, and 13 and the general purpose, benefits, and costs of proceeding under each of those chapters; and
 - (B) the types of services available from credit counseling agencies; and
 - (2) statements specifying that
 - (A) a person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection with a case under this title shall be subject to fine, imprisonment, or both; and
 - (B) all information supplied by a debtor in connection with a case under this title is subject to examination by the Attorney General.
- 2. The following disclosures are required by § 527(a)(2), which advises an assisted person that:
 - (A) all information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful;
 - (B) all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in § 506 must be stated in those documents where requested after reasonable inquiry to establish such value;
 - (C) current monthly income, the amounts specified in section 707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with § 707(b)(2)) are required to be stated after reasonable inquiry; and
 - (D) information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

If you have any questions about any of these disclosures, we will be happy to provide further explanation.

We also call your attention to Exhibits A and B attached to the Representation and made a part thereof.

EXHIBIT A

Separate Disclosure Required by Section 527 of the Bankruptcy Code as Amended

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY

(Note: This form is mandated by statute. It may or may not correctly explain the law.)

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. The law requires an attorney or bankruptcy petition preparer to give you a written contract specifying what the attorney or bankruptcy petition preparer will do for you and how much it will cost. Ask to see the contract before you hire anyone.

The following information explains what must be done in a routine bankruptcy case to help you evaluate how much service you need. Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and decide which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents (Petition, Schedules, Statement of Financial Affairs, and in some cases a Statement of Intention) must be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you must attend the required first meeting of creditors, where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a Chapter 13 case, in which you repay your creditors what you can afford over 3 to 5 years, you may also want help preparing your Chapter 13 plan and with the confirmation hearing on your plan, which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you should consult someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only lawyers, not bankruptcy petition preparers, can give you legal advice.

Client hereby acknowledges receipt of a copy of this disclosure.

EXHIBIT B

Information to the Assisted Person (Debtor) on How to Provide All Information Required by Section 521

Section 521 of the Code sets out the Debtor's duties related to the filing of a bankruptcy case. A copy of the section is attached to this writing.

As you fill out these schedules and statement of affairs, you should keep the following in mind:

- 1. Completing the income and expense pages accurately and completely is critical.
 - (a) To compile your income, refer to recent pay stubs and last year's income tax returns. Accounting for overtime, investment dividends, and other earnings is necessary.
 - (b) People usually pay cash for many items, such as groceries. Review your monthly expense payments and make a best estimate on cash expenditures. If you pay insurance annually, calculate the monthly cost. Attached are IRS expense allowances for the area in which you live. If your expenses exceed these, we will have to review them and perhaps make adjustments.
 - (c) When you value property you own, consider prices in the neighborhood for housing, in newspapers and car lots for automobiles, and what you would pay for furniture and clothes at a business selling such goods.
 - (d) If you have an item of special value, an appraisal may be necessary.
 - (e) When listing creditors, collect current bills and use that information for mailing addresses and balances due.
 - (f) Under the law of this state, or federal bankruptcy law, certain property may be exempt and may be retained. Attached is a copy of the state list of exemptions and also a list of property that may be exempt under federal law. Neither list is all-inclusive. If a seller has a lien on exempt property, the lien may be avoidable or you may have to pay for the property in order to keep it. After you have prepared these lists, we can review them and decide what property qualifies as exempt.

ADDITIONAL FEES- The *only* reason that you may be charged additional fees is a) *Failing to list debts* at time of filing that later have to be added to your bankruptcy documents. There is a \$100 charge to amend your petition, b) *Missing court date*. You must attend a meeting of creditors approximately 4 - 6 weeks after your case is filed. I still have to appear if you cannot, so there will be a \$150 additional fee for a missed court date. c) *Adversary objections* to discharge debts based on fraudulent use of credit cards or other dischargeability issues. Fee for litigating a dischargeability issue is \$200 per hour, five hours to be paid in advance if we decide to represent you. d) *Lien avoidance*. You agree that the above quoted fee does not include services provided to avoid judgment liens (\$200 per hour) and non-purchase money security interests (\$200 per hour). You understand and agree that if you do not pay the fee, I will not bring the motion and the lien will survive the bankruptcy. **Reaffirmations**- Once you reaffim a debt, you may only rescind the reaffirmation agreement by contacting our office no less than two weeks prior

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to the bar date for rescissions. You may only reaffirm a debt if it does not impose an undue hardship to you.

| Secured Debts | Unsecured Debts | Non-Dischargeable |
|--|---|---|
| Mortgage Arrears | | Tax |
| Mortgage Balance | | Student Loans |
| Car Balance | | Gov't Fines |
| Loans | | Misc |
| Total Secured \$ | Total Unsecured | Total Non-Disc \$ |
| What you must provide | before I file your case: (I canno | ot file without this information!) |
| | al income tax returns for the prior 2 years | · |
| | | oncerning your earnings for the past 6 months |
| All bills from all credi | tors for the past 90 days so that we may | determine the proper place to send notice. |
| All loan documents for | or all secured loans, including home loans | and auto loans |
| Your social security of | card | |
| Your photo identification | tion card | |
| List of your househol | d income and expenses | • |
| Details concerning even | very item of property you own, including r | real estate and personal property |
| Details concerning ar | ny litigation in which you involved now or | in which you may be involved in the future. |
| Information on any is may be a beneficiary | nheritance you may have received, expec | t to receive or trust as to which you are or |
| • Information on all ins | surance policies | |
| Credit Counsel | ling Certificate | |
| | at I/We have read and reviewed the erstand all of its contents. | nis 5 page retainer/representation |
| XXX MIN CXX | | |

Attorney on behalf of Worwag & Malysz, PC

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United States Bankruptcy CourtNorthern District of Illinois

| | | 1 (of the H District of Immors | | |
|-------|--|---|-----------------------------|----------------|
| In re | Sylwester Kopec | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | | | | |
| | VI | ERIFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 11 |
| | The above-named Debtor(s) (our) knowledge. |) hereby verifies that the list of credit | tors is true and correct to | the best of my |
| | May 2, 2016 | /s/ Sylwester Kopec | | |

Aac Po Box 2036 28405 Van Dyke Rd Warren, MI 48093

Allied Interstate PO Box 361445 Columbus, OH 43216

Amex Po Box 297871 Fort Lauderdale, FL 33329

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

Capital One Auto Financial 3901 Dallas Pkwy Plano, TX 75093

Cavalry Portfolio Services Po Box 27288 Tempe, AZ 85285

Chase Card Po Box 15298 Wilmington, DE 19850

Jefferson Capital Systems 16 Mcleland Rd Saint Cloud, MN 56303

Midland Funding 2365 Northside Dr Suite 30 San Diego, CA 92108

The Shindler Law Firm 1990 E. Algonwuin Rd. Suite 180 Schaumburg, IL 60173

Wells Fargo Home Mortgage 8480 Stagecoach Cir Frederick, MD 21701